

copy

## **DECLARATION AND POWER OF ATTORNEY**

As a below named inventor, I hereby declare: THAT my residence, post office address and citizenship are as stated below next to my name; THAT I verily believe I am the original, first and sole (if only one name is listed below) or a joint inventor (if plural inventors are named below) of the invention entitled: \_\_\_\_\_

METHOD AND APPARATUS FOR SKIN REJUVENATION AND WRINKLE SMOOTHING of the specification of which:

- ☒ is attached hereto.  
☐ was filed on \_\_\_\_\_ as Application Serial No. \_\_\_\_\_  
and was amended on \_\_\_\_\_ (if applicable).  
☐ is amended in the attached Amendment.

THAT I do not know and do not believe that this invention was ever known or used in the United States of America before my or our invention or discovery thereof, or patented or described in any printed publication in any country before my or our invention or discovery thereof, or more than one year prior to this application;

THAT the invention was not in public use or on sale in the United States of America for more than one year prior to this application;

THAT this invention has not been patented or made the subject of an inventor's certificate issued before the date of this application in any country foreign to the United States of America on an application filed by me or my legal representatives or assigns more than twelve months before this application;

THAT I have reviewed and understand the contents of the above identified specification, including the claim(s), as amended by any amendment referred to above;

THAT I acknowledge the duty to disclose information of which I am aware which is material to the examination of this application in accordance with 37 CFR §1.56; and

THAT I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

PRIOR FOREIGN APPLICATION(S)			Priority Claimed	
_____ (Number)	_____ (Country)	_____ (Day/Month/Year filed)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
_____ (Number)	_____ (Country)	_____ (Day/Month/Year filed)	<input type="checkbox"/> Yes	<input type="checkbox"/> No

And I hereby appoint, as my attorneys to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith and with the resulting patent; individually and collectively:

**Foley & Lardner**  
**777 East Wisconsin Avenue**  
**Milwaukee, Wisconsin 53202**

telephone number (414) 271-2400 (to whom all communications regarding the subject application are to be directed); and each attorney thereof named below with Registration Numbers, and of the same address:

Russell J. Barron	Reg. No. 29,512
Stephen A. Bent	Reg. No. 29,768
David A. Blumenthal	Reg. No. 26,257
John C. Cooper	Reg. No. 26,416
Harry C. Engstrom	Reg. No. 26,876
John J. Feldhaus	Reg. No. 28,822
Donald D. Jeffery	Reg. No. 19,980
Jack L. Lahr	Reg. No. 19,621
Peter G. Mack	Reg. No. 26,001
Brian J. McNamara	Reg. No. 32,789
Sybil Meloy	Reg. No. 22,749
Philip G. Meyers	Reg. No. 30,478
James G. Morrow	Reg. No. 32,505
James P. O'Shaughnessy	Reg. No. 27,667
Colin G. Sandercock	Reg. No. 31,298
Bernhard D. Saxe	Reg. No. 28,665
William J. Scanlon	Reg. No. 30,136
Richard L. Schwaab	Reg. No. 25,479
Arthur Schwartz	Reg. No. 22,115

I declare further that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Inventor's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Inventor's Name (Typed):

<u>Shimon</u>	<u>Eckhouse</u>
First	Family Name

Citizenship: \_\_\_\_\_

Israeli

Residence (City): \_\_\_\_\_

Haifa

(State/Foreign Country): \_\_\_\_\_

Israel

Post Office Address: \_\_\_\_\_

27 Ester-Rabin Street, Haifa, Israel  
(Zip code) 34987

[x] CHECK HERE if additional sheet attached for additional inventors.

Inventor's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Inventor's Name (Typed):

Michael Kreindel  
First Middle Initial Family Name

Citizenship: \_\_\_\_\_

Israeli

Residence (City): \_\_\_\_\_

Haifa

(State/Foreign Country): \_\_\_\_\_

Israel

Post Office Address: \_\_\_\_\_

33 Bar Rav Hay David Street, Apt. 16,  
Haifa, Israel (Zip code) 39955

Inventor's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Inventor's Name (Typed):

First Middle Initial Family Name

Citizenship: \_\_\_\_\_

Residence (City): \_\_\_\_\_

(State/Foreign Country): \_\_\_\_\_

Post Office Address: \_\_\_\_\_

(Zip code) \_\_\_\_\_

Inventor's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Inventor's Name (Typed):

First Middle Initial Family Name

Citizenship: \_\_\_\_\_

Residence (City): \_\_\_\_\_

(State/Foreign Country): \_\_\_\_\_

Post Office Address: \_\_\_\_\_

(Zip code) \_\_\_\_\_

Inventor's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Inventor's Name (Typed):

First Middle Initial Family Name

Citizenship: \_\_\_\_\_

Residence (City): \_\_\_\_\_

(State/Foreign Country): \_\_\_\_\_

Post Office Address: \_\_\_\_\_

(Zip code) \_\_\_\_\_

Inventor's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Inventor's Name (Typed):

First Middle Initial Family Name

Citizenship: \_\_\_\_\_

Residence (City): \_\_\_\_\_

(State/Foreign Country): \_\_\_\_\_

Post Office Address: \_\_\_\_\_

(Zip code) \_\_\_\_\_